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James F. Kile, Commissioner

\_\_\_\_\_/s/\_\_\_\_\_  
R. D. Maynard, Commissioner

ATTEST:

\_\_\_\_\_/s/\_\_\_\_\_  
Assistant Commission Secretary

**CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_15<sup>th</sup>\_\_ day of \_\_\_\_July\_\_\_\_, 2005, a true and correct copy of the foregoing **ORDER** was served by regular United States Mail upon each of the following persons:

SCOTT ROSE  
300 MAIN ST STE 153  
BOISE ID 83702

NATALIE CAMACHO MENDOZA  
623 W HAYS ST  
BOISE ID 83702

\_\_\_\_\_/s/\_\_\_\_\_

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